Florida Department of State

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Account Name : C T CORPORATION SYSTEM

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DISSOLUTION OR WITHDRAWAL GAVIN DE BECKER & ASSOCIATES, INC.

Certificate of Status	0
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8/6/2014

COVER LETTER

TO:	Amendment Section Division of Corporations				
	Gavin de Recker & Associates, Inc.				
SUBJ	ECT:	(Name of Corpo	ration)		
	F13000002767		,		
DOC	UMENT NUMBER:				
The e	nclosed withdrawal application and	fee are submitted	for filing.		
	e return all correspondence concerning r to the following:	; this			
	Joshua Gausman				
		(Name of Person	n)		
	Gavin de Becker & Associates, L.P.				
	(Firm/Company)				
	11684 Ventura Blvd, Suite 440				
	(Address)				
	Studio City, CA 91604				
	(0	City/State and Zip	code)		
For fi	urther information concerning this mat	ter, please call:			
Joshua Gausman		at (505.0177		
Enclo	(Name of Person) used is a check for the amount:	(Area	a Code & Daytime Telephone Number)		
\$ 3	5 Filing Fee \$\int\\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing I Certified Copy (Additional co Enclosed)	Certificate of Status & Certified		
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301		

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TELEPHETARY OF STATE
TALLAHASSEE. FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Gavin De Becker & Associates, Inc.			
(Name of Corporation)	(Name of Corporation)		
F13000002767			
(Document Number of Corporation (i	f known)		
California			
(Incorporated Under Laws of)		
This corporation is no longer transacting business or conducting af voluntarily surrenders its authority to transact business or conduct a This corporation revokes the authority of its registered agent in 1	ffairs in Florida.		
appoints the Department of State as its agent for service of proces the time it was authorized to transact business or conduct affairs in			
The following is a current mailing address for the corporation:			
11684 Ventura Blvd, Spite 440			
(Mailing Address)			
Studio City, CA 91604			
(City/State/Zip)			
The corporation agrees to notify the Department of State in the futu	re of any change in its mailing address.		
(Signature of a director, president or other officer - if in the tunds of a	(Date)		
receiver or other court appointed fiduciary, by that fiduciary)	·,		
Joshua Gausman	Chief Operating Officer		
(Typed or printed name of person signing)	(Title of person signing)		

FILING FEE \$35